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TRANSMITTAL FORM

Application Number	10/506,726
Filing Date	February 25, 2005
First Named Inventor	Axel Eggert
Group Art Unit	3725
Examiner Name	Jimmy T. Nguyen
Attorney Docket No.	20496-455
Patent No.	Not yet assigned
Issue Date	Not yet assigned

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input checked="" type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input checked="" type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate) <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <input checked="" type="checkbox"/> Enclosure I: Lueger with Translation (4 pages) <input checked="" type="checkbox"/> Enclosure II: IEEE Publication (8 pages)
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CORRESPONDENCE ADDRESS

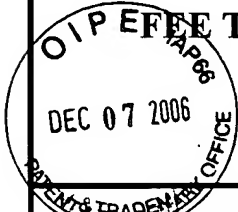
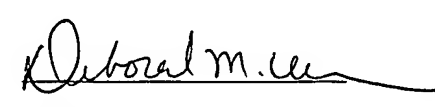
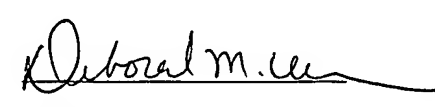
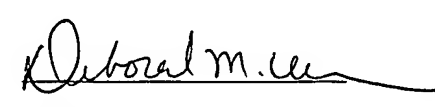
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SIGNATURE BLOCK

Date: December 7, 2006
 Reg. No.: 55,699
 Tel. No.: (617) 526-9836
 Fax No.: (617) 526-9899

Respectfully submitted,

Deborah M. Vernon
 Proskauer Rose LLP
 One International Place
 Boston, MA 02110-2600

 FREE TRANSMITTAL FY 2006					<i>Complete if Known</i>																																																																																																																																																																
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See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). </td> </tr> <tr> <td>Total Sheets</td> <td>Extra Sheets</td> <td>Additional 50 or fraction thereof</td> <td>Fee (\$)</td> <td>Fee Paid</td> </tr> <tr> <td>-100= 0</td> <td>/50=</td> <td>round up to a whole number</td> <td>x</td> <td>= 0.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">3. TOTAL:</td> <td>0.00</td> </tr> <tr> <td colspan="5" style="text-align: center;">CORRESPONDENCE ADDRESS</td> </tr> <tr> <td colspan="5"> Direct all correspondence to: Patent Administrator Proskauer Rose LLP One International Place Boston, MA 02110 Tel. 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